



## Claims Examiner Authorization

**CLAIM #:** 040519008736  
**DOI:** 02/15/2019  
**INSURED:** Biotelemetry, Inc.  
**CARRIER/TPA:** Chubb & Son (WC) - Los Angeles, CA /  
**CLAIMANT:** Jonathan Shockley  
**CORVEL #:** 139249073-UMO-24  
**ADJUSTER:** Mario Castro

**Determination Date:** 06/23/2020  
**RFA Received Date:** 06/19/2020  
**Provider:** Babak Jamasbi, MD  
**Pre-Cert #:** 139249073-UMO-24  
**Network:** N/A

The below request is **AUTHORIZED**. The decision was made on 6/23/20 and is summarized below:

CONSULT					
Determination	Type of Consult	Effective Date	Termination Date	Facility	Provider
Requested	Surgical consult for bilateral elbows	6/23/20	12/23/20		
Certified	Surgical consult for bilateral elbows	6/23/20	12/23/20		

Claims Examiner: Mario Castro  
Contact Information: (213) 612-0880  
Hours of operation: 8:30 am to 5:30 pm, M-F

**\*\*NOTE\*\***

**Please attach a copy of this recommendation letter  
with your bill; otherwise, payment may be  
delayed.**

*Utilization review does not include determinations of employer liability of the work injury, or of bill review for the purpose of determining whether the medical services were accurately billed.*



**ELECTRONIC PROOF OF SERVICE**

I am a citizen of the United States and a resident of the County of Washington; I am employed by CorVel Corporation, am over the age of eighteen years and not a party to the within entitled action; my business address is 111 SW 5<sup>th</sup> Avenue, Suite 200, Portland, Oregon, 97204.

I am readily familiar with CorVel's practice for electronic service of correspondence that is maintained on CorVel's electronic database.

On June 24, 2020, the within letter(s) were served on the parties in said action, by sending a true copy thereof **electronically** (facsimile) on the following parties:

Babak Jamasbi, MD  
Fax: (510) 647-5105

Erika.Perez@Chubb.com  
Email: Erika.Perez@Chubb.com

Executed on June 24, 2020, at Portland, Multnomah County, Oregon, 97204.

I, Linda Grant, declare under penalty of perjury, under the laws of the **STATE OF OREGON**, that the foregoing is true and correct.

A handwritten signature in black ink, appearing to read 'Linda A. Grant', written over a horizontal line.

Signature

File: 139249073 Shockley



**PROOF OF SERVICE BY MAIL**

I am a citizen of the United States and a resident of the County of Clark; I am employed by CorVel Corporation, am over the age of eighteen years and not a party to the within entitled action. My business address is 4120 SE International Way, Suite A108, Milwaukie, OR 97222. I am readily familiar with CorVel's practice for collection and processing of correspondence maintained on CorVel's electronic database for mailing with the U. S. Postal Service. Under such practice, correspondence that is printed for mail service would be put in a sealed envelope with postage thereon fully prepaid and placed for collection and mailing on the same date by depositing such with the U.S. postal service in the ordinary course of business.

On June 24, 2020, the within letter(s) were served on the parties in said action, by placing a true copy thereof enclosed in a sealed envelope, with postage thereon fully prepaid addressed as follows:

Babak Jamasbi, MD  
1335 Stanford Ave.  
Emeryville  
CA  
94608

Christian Charles Colantoni  
201 Spear Street, Ste. 1100  
San Francisco  
CA  
94105

Farber & Co  
333 Hegenberger Road #504  
  
Oakland  
CA  
94621

Jonathan Shockley  
1000 Sutter St.  
San Francisco  
CA  
94109

Executed on June 24, 2020 at Milwaukie, OR 97222.



I, Becca Guimont, declare under penalty of perjury, under the laws of the **STATE OF OREGON**, that the foregoing is true and correct.

A handwritten signature in black ink that reads 'Becca Guimont'.

\_\_\_\_\_  
Signature

File: 040519008736, Shockley Jonathan